



IN THE CIRCUIT COURT OF _____ COUNTY, MISSOURI

Judge or Division:	Case Number:
	Court ORI Number:
Petitioner: Protected Child: DOB/Age of Protected Child: SSN: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race: _____ vs.	Respondent's Home Address: Home Phone Number: _____ (Date File Stamp)
Respondent: Alias/Nicknames:	Respondent's Work Address: Work Phone Number: Work Hours:
Respondent's DOB: SSN (if known): Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race: _____	Protected Child's Relationship to Respondent: <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____

**Affidavit of Changes in Circumstance and
Motion to Modify Judgment/Full Order of Child Protection**

A Judgment/Full Order of Child Protection was entered in _____ County, Missouri, on _____ (date).

A change has occurred in the circumstances of the child or his/her custodian and the modification is necessary to serve the best interests of the child. Below are the specific facts, including dates and times, which ☐ petitioner ☐ respondent ☐ Guardian ad Litem ☐ Court Appointed Special Advocate believes forms grounds for modification of the court's judgment:

I request that the court find grounds for modification of:
(check the box that applies)

- ☐ Installments of maintenance or support.
☐ Custody.
☐ Visitation.
☐ Other (specify): _____

I swear /affirm under penalty of perjury that these facts are true according to my best knowledge and belief.

Date

Your Signature

NOTICE: Section 455.510.3 RSMo provides that a Petitioner seeking protection under the Child Protection Orders Act is not required to reveal any current address or place of residence of the child on this petition. **Do not provide this information if doing so will endanger the child.**

Your Street Address

City

State

Zip

Your Telephone Number

In witness thereof:

Date

Clerk Witnessing Signature

(Seal)

Subscribed and sworn to before me on _____

My commission expires: _____
Date Notary Public

Directions for Completing

This affidavit must be completed and signature witnessed by a court clerk or notary before filing it with the court.